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CONFIRMATION NO. 7712

Bib Data Sheet

<b>SERIAL NUMBER</b> 09/842,587	<b>FILING OR 371(c) DATE</b> 04/26/2001 <b>RULE</b>	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2628	<b>ATTORNEY DOCKET NO.</b> 17541.014US1
<b>APPLICANTS</b> Aly A. Farag, Louisville, KY; David Tasman, Louisville, KY; Sameh M. Yamany, Weston, FL;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/199,913 04/26/2000				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/18/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> KY	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 20
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> 53137				
<b>TITLE</b> SYSTEM AND METHOD FOR 3-D DIGITAL RECONSTRUCTION OF AN ORAL CAVITY FROM A SEQUENCE OF 2-D IMAGES				
<b>FILING FEE RECEIVED</b> 1130	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	